

DECLARATION FOR USA PATENT APPLICATION

(including Design and National Stage PCT)

Attorney's Docket ID: 11/98

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below adjacent to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought

on the invention entitled: A TELECOMMUNICATION SYSTEM WITH A RELAY SATELLITE

the specification of which:

is attached hereto.

(or)

was filed on _____ as U.S. Application No. or PCT International Application No. _____

and (if applicable) was amended on _____

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, where priority is claimed, any foreign application for patent or inventor's certificate, or any PCT International application, having a filing date before that of the application on which priority is claimed. ADDITIONAL APPLICATIONS IDENTIFIED ON ATTACHED SHEET

O I P E
JUN 13 2000
PATENT & TRADEMARK OFFICE

Prior Foreign Application No.

Country

Day/Month/Year Filed

Priority Not Claimed

00-00176

FRANCE

07/01/2000

I hereby claim the benefit under 35 U.S.C. 120 of any U.S. application(s), or 365(c) of any PCT application designating the U.S., listed below; and insofar as the subject matter of each claim of this application is not disclosed in the prior U.S. or PCT application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT filing date of this application. ADDITIONAL APPLICATIONS IDENTIFIED ON ATTACHED SHEET

U.S. or PCT Parent Application No.

Parent Filing Date (Day/Month/Year)

Parent Patent No. (if applicable)

As a named inventor, I hereby appoint the registered practitioners of LARSON & TAYLOR associated with Customer Number 000881 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Direct all correspondence to that Customer Number.

Direct all telephone calls to at TEL (703) 739-4900 (Fax: 703-739-9577) e-mail: _____

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1000 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SOLE OR FIRST INVENTOR	Citizenship
Given Name (first and middle [if any]) Frédéric	French Family Name or Surname d'ALLEST
Full Post Office Address 6, rue Marcel Allégot, 92190 MEUDON, France	
Residence - City, State/Country (if different from PO address)	
SIGN AND DATE HERE Inventor's Signature	Date 17/4/01
SECOND JOINT INVENTOR (if any)	
Given Name (first and middle [if any])	Citizenship
Family Name or Surname	
Full Post Office Address	
Residence - City, State/Country (if different from PO address)	
SIGN AND DATE HERE Inventor's Signature	Date
THIRD JOINT INVENTOR (if any)	
Given Name (first and middle [if any])	Citizenship
Family Name or Surname	
Full Post Office Address	
Residence - City, State/Country (if different from PO address)	
SIGN AND DATE HERE Inventor's Signature	Date
FOURTH JOINT INVENTOR (if any)	
Given Name (first and middle [if any])	Citizenship
Family Name or Surname	
Full Post Office Address	
Residence - City, State/Country (if different from PO address)	
SIGN AND DATE HERE Inventor's Signature	Date